



PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail****Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
(571) 273-2885**or **Fax**

INSTRUCTIONS: This form should be used for transmitting the **ISSUE FEE** and **PUBLICATION FEE** (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

7590

12/21/2005

Milliken & Company
920 Milliken Road, M-495
Spartanburg, SC 29303

02/23/2006 TBESHAH2 00000041 040500 10044173

01 FC:1501 1400.00 DA
02 FC:1504 300.00 DA

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

CHERYL J. BRICKEY

(Depositor's name)

(Signature)

FEBRUARY 22, 2006

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/044,173	10/22/2001	Elizabeth Cates	5335	1600

TITLE OF INVENTION: TEXTILE SUBSTRATE HAVING COATING CONTAINING MULTIPHASE FLUORO-CHEMICAL AND CATIONIC MATERIAL THEREON FOR IMAGE PRINTING

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	03/21/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
RUDDOCK, ULA CORINNA	1771	442-079000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 **TERRY T. MOYER**2 **CHERYL J. BRICKEY**3 **JEFFERY E. BACON**

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

MILLIKEN & COMPANY 920 Milliken Rd., Spartanburg, SC 29303 USAPlease check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee (No small entity discount permitted)☐ Advance Order - # of Copies _____

4b. Payment of Fee(s):

☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number **04-0500** (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Date **FEBRUARY 22, 2006**Typed or printed name **CHERYL J. BRICKEY**Registration No. **56,891**

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



02/22/2006 15:52 8645032103

MILLIKEN LEGAL

PAGE 01/03

Legal Department
Milliken & Company, (M-495)
920 Milliken Road
P.O. Box 1926
Spartanburg, SC 29304

Fax

To: Mail Stop **ISSUE FEE**
US PTO
Commissioner for Patents

From: CHERYL J. BRICKEY

Fax: (571) 273-2885

Fax: (864) 503-1999

Phone:

Phone: (864) 503-1540

Subject: Application of: Cates et al.
Serial Number: 10/044,173
Filed: October 22, 2001
Group Art Unit: 1771
Examiner: Ruddock, Ula Corinna
~~CASE #:~~ 5335

Date: Wednesday, February 22, 2006

Copies:

Pages: 2, including cover

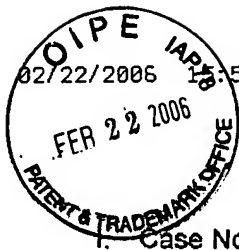
Comments:

Please confirm, via facsimile, your receipt of the following documents:

- This fax transmittal: 1 page
- Issue Fee Part B – Fee Transmittal, with copy thereof: 1 page

Confidentiality Notice:

Privileged/Confidential information may be contained in this facsimile and is intended only for the use of the addressee. If you are not the addressee, or the person responsible for delivering this facsimile to the addressee, you may not copy or deliver it to anyone else. If you receive this facsimile by mistake, please notify us immediately by telephone. Thank you.

**Notice Of Allowance Check List**Case No.: 5335 Application Serial No.: 10/044,173II. Examiner's Amendments and/or Reasons for Allowance Received ☒

III. Claims as Allowed — Attach copy of Claims as allowed.

IV. Continuations / Divisionals / C-I-Ps

A. Other Related US Applications: ☐ Yes ☒ No.

Case No.	Status (Pending/Issued/Abandoned)	Patent or Application No.

B. Restrictions/Elections: ☐ Yes ☒ No.

Group No.	Claim Nos.	Elected?	
		Yes	No

C. Claim Scope Review By Attorney/Agent: ☒ Yes.

V. Prior Art

A. Cited Prior Art - Attach copy of all Forms PTO-1449 and PTO-892 *✓ and is up to date*

B. International/Foreign Applications — List all international applications (PCT) and all Foreign Countries into which applications were applied:

C. Discovered Prior Art Citation Check — Check each of the following to ensure that any potential reference from each of the following sources was listed in the Cited Prior Art:

Source	All References Cited?	
	Yes	No
Invention Record	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Searches	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Written Application	<input checked="" type="checkbox"/>	<input type="checkbox"/>
File	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Foreign Search Reports	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>

VI. Assignment

A. Assigned to the Correct Entity (i.e. Milliken & Company, Milliken Ind. etc.)

B. Executed by all Inventors: ☐ Yes ☐ No.C. Recorded: ☐ Yes ☐ No. Reel: Frame: VII. Drawings — Check Drawing Requirements — Formal Submitted ☒ Yes ☐ NoChecked and Approved by: ☒ Date: Cut Check? ☐ Yes ☐ No Due Date:

Allowance Check List JB030117